PARTY (Name and address	;):		FOR COURT USE ONLY
_			
TELEPHONE NO. (Option	nal)·		
E-MAIL ADDRESS (Option			
FAX NO. (Option			
	·		-
	FOF CALIFORNIA, COUNTY OF		
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE: BRANCH NAME:			
BIANOTI NAME.			
PLAINTIFF:			
DEFENDANT:			
ORDER ON REQUEST TO POSTPONE SMALL CLAIMS HEARING			CASE NUMBER:
1. The reque	est to postpone the small claims hearing is d to:	granted. The hearing (date):	
Date:	Time:	Dept.:	Room:
ALL PARTIES ARE ORDERED TO APPEAR IN COURT AT THE TIME AND PLACE SHOWN ABOVE.			
2. The request to postpone the small claims hearing is denied . THE CASE REMAINS SET ON THE ORIGINAL HEARING DATE. ALL PARTIES MUST BE PRESENT ON THAT DATE.			
a. The request was not accompanied by a \$10 filing fee.			
b. The request was not filed at least 10 days before the hearing and good cause was not shown for the late request.			
c. Other (specify):			
Date:			
			(JUDICIAL OFFICER)
	CLERK'S CERTIFICA	TE OF MAILING COURT C	RDER
I certify that I am not a party to this action. This <i>Order on Request to Postpone Small Claims Hearing</i> was mailed first class, postage prepaid, in a sealed envelope addressed as shown below. The mailing and this certification occurred at <i>(place)</i> :			
	,	California, on (date):	
Date:	Clerk.		. Deputy